

TENNESSEE GENERAL ASSEMBLY
FISCAL REVIEW COMMITTEE



FISCAL MEMORANDUM

HB 607 – SB 639

March 7, 2017

SUMMARY OF ORIGINAL BILL: Authorizes a healthcare provider or individual medical professional that executes a contract with the Department of Health (DOH) or a governmental contractor to deliver volunteer healthcare services to eligible low-income patients to be considered an agent of the state for purposes of the Tennessee Governmental Tort Liability Act, while acting within the scope of the duties under the contract so long as the contract complies with this section and regardless of whether the individual treated is later found to be ineligible for such services. Requires that the healthcare provider or medical professional under contract with the state will not be named as a defendant in any action arising out of medical care or treatment provided under the terms of contracts entered into under this section.

Requires the DOH to establish a quality assurance program to monitor services delivered under any contract entered into. Requires the DOH to annually report to the Speaker of the Senate, the Speaker of the House of Representatives, the Minority Leaders, and the Chairs of the Health and Welfare Committee of the Senate and the Health Committee of the House of Representatives, summarizing the efficacy of access and treatment outcomes with respect to providing healthcare services for low-income patients.

FISCAL IMPACT OF ORIGINAL BILL:

Increase State Expenditures - \$13,500/One-Time
\$260,600/Recurring

SUMMARY OF AMENDMENT (004570): Deletes all language after the enacting clause. Authorizes a healthcare provider to satisfy one hour of continuing education requirements for maintaining a license issued through the performance of one hour of voluntary provision of healthcare services, not to exceed eight hours or 20 percent of the total annual requirement for the applicable license. Requires the healthcare provider, upon providing evidence of completion of the voluntary provision of healthcare services, to identify in any documentation required to be submitted to the applicable licensing board, the name and contact information of the sponsoring organization. Authorizes the Division of Health Related Boards to charge a fee to the healthcare provider for satisfying continuing education requirements.

FISCAL IMPACT OF BILL WITH PROPOSED AMENDMENT:

NOT SIGNIFICANT

Assumptions for the bill as amended:

- Based on information provided by the Department of Health, the Division of Health Related Boards can accommodate the provisions of the proposed legislation within existing resources without an increased appropriation or reduced reversion.
- Health related boards are required to be self-supporting; it is assumed that the Boards will charge a fee to offset any increase in expenditures. However, any increase in fee revenue or any increase in expenditures to the Boards is estimated to be not significant.

CERTIFICATION:

The information contained herein is true and correct to the best of my knowledge.

A handwritten signature in blue ink that reads "Krista M. Lee".

Krista M. Lee, Executive Director

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